

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	GUIDE DEVICE AND PLATE INSERTER
Attorney Docket Number::	101896-0233
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	9
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Tushar
Family Name::	Patel
City of Residence::	Potomac
State or Province of Residence::	MD
Country of Residence::	US
Street of mailing address::	8113 Buchspark Lane
City of mailing address::	Potomac
State or Province of mailing address::	MD
Postal or Zip Code of mailing address::	20854

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eric
Middle Name:: D.
Family Name:: Kolb
City of Residence:: Quincy
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 308 Quarry Street
City of mailing address:: Quincy
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02169

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jonathan
Family Name:: Fanger
City of Residence:: Fall River
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 3 Rolling Green Drive, Apt. H
City of mailing address:: Fall River
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02720

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Family Name:: Fessler

City of Residence:: Winnetka
State or Province of Residence:: IL
Country of Residence:: US
Street of mailing address:: 977 Ash Street
City of mailing address:: Winnetka
State or Province of mailing address:: IL
Postal or Zip Code of mailing address:: 60093

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United Kingdom
Status:: Full Capacity
Given Name:: Alan
Family Name:: Crockard
City of Residence:: London
Country of Residence:: United Kingdom
Street of mailing address:: The National Hospital for Neurology and
Neurosurgery, Queen Square
City of mailing address:: London
Country of mailing address:: United Kingdom
Postal or Zip Code of mailing address:: WC 1N 3BG

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Todd
Family Name:: Albert
City of Residence:: Penn Valley
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 1434 Flat Rock Road
City of mailing address:: Penn Valley
State or Province of mailing address:: PA

Postal or Zip Code of mailing address:: 19072

Correspondence Information

Correspondence Customer Number:: 021125

Representative Information

Representative Customer Number:: 021125

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/409,958	04/09/2003